



Notice of Intent (NOI) for Stormwater Discharge from
Large and Small Construction Activities
NPDES General Permit SCR100000

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NOV 05 2007

For official use only

File number: 07-04-0204A

Permit number: SCR10H.634

Submission package complete: 11-5-07

Public Notice Start Date (OCRM only): 11-9-07

For official use only

DHEC-OCRM
BEAUFORT OFFICE

Submission of an NOI constitutes notice that the entity identified in Section I intends to be authorized under SCR100000. Instructions on page 4.

Date: 11 / 05 / 2007

Project/ Site Name: ISLAND WEST SUBDIVISION, PHASE 3B

County: BEAUFORT

Do you want this project to be considered for the Expedited Permitting Program (EPP)? ☐ Yes ☐ No (See instructions.)

I. Project Information

Project Owner/ Operator (Company or person): ISLAND WEST ASSOCIATES, INC.

Permit Contact (if owner is company): KENNETH F.P. SKODACEK

Company EIN: [REDACTED]

Mailing Address: 140-C BEACH CITY ROAD

City: HILTON HEAD

State: SC Zip: 29926

Phone: (Day) 843 - 217 - 7112

(Mobile) _____

(Fax) _____

Email address (optional): kfps@roadrunner.com

II. Property Information

A. Site Location (street address, nearest intersection, etc.): NEW PHASE EXTENDED BEYOND BLYTHE ISLAND DRIVE

City/ Town (if in limits): Bluffton

Latitude: 32 ° 16 ' 35 " N Longitude: -80 ° 54 ' 38 " W

Tax map # (list all): R600-021-000-0019-0000

B. Property Owner (if different from section I above): ISLAND WEST ASSOCIATES, INC.

Mailing Address: 140-C BEACH CITY ROAD

City: HILTON HEAD

State: SC Zip: 29926

Phone: (Day) 843 - 217 - 7112

III. Site Information

A. Disturbed area (to the nearest tenth of an acre): 2.3 Total area: 4.6

B. Is this project part of a Larger Common Plan for Development or Sale (LCP)? ☒ Yes ☐ No

If yes, what is the previous state permit number? 07 - 04 - 02 - 04 Previous NPDES number: SCR10

LCP/ Overall Development Name: ISLAND WEST, PHASE 3A

C. Start Date (MM/DD/YYYY): 02 / 01 / 2008 Completion Date: 06 / 01 / 2008

D. Is this site located on Indian Lands? ☐ Yes ☒ No If yes, name of reservation: _____

E. Type of Activity (check all that apply):

☐ Commercial ☒ Residential: Single-family ☐ Linear (Roads, utility lines, etc.) ☐ Other: _____

☐ Institutional ☐ Residential: Multi-family ☐ Site Preparation (No new impervious) _____

F. Are there any flooding problems downstream or adjacent to this site? ☐ Yes ☒ No

G. Is this NOI being submitted in response to a Notice to Comply issued by S.C. DHEC? ☐ Yes ☒ No

H. Is any part of the property located inside an MS4 or urbanized area? ☐ Yes ☒ No

If yes, list the MS4 operator or urbanized area name: _____

IV. Waterbody Information

A. Nearest receiving waterbody(s): OKATIE RIVER Distance to this waterbody (feet): 3,600 FEET

Next/Nearest named receiving waterbody(s): COLLETON RIVER

B. Wetlands/ Waters of the State

	On the site?	If yes, delineated/identified?	Impacts?	Amount of impacts
1. Waters of the U.S./ State	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Ac _____ Feet
a. Perennial stream(s)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Ac _____ Feet
b. Intermittent stream(s)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Ac _____ Feet
c. Ephemeral stream(s)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Ac _____ Feet
d. Jurisdictional wetlands	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Ac _____ Feet
e. Non-jurisdictional wetlands	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<u>1.09</u> Ac _____ Feet
f. Other (List): _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____ Ac _____ Feet

2. If yes for impacts in item B.1, has a USACOE permit been applied for or obtained for those impacts?

☐ Yes ☐ No ☒ N/A If yes, list the permit/ application number: _____

C. Impaired Waterbodies

Do stormwater (SW) discharges from the site drain to a watershed that drains to a DHEC WQ monitoring site (WQMS)?

1. Listed on the most current 303(d) List for Impaired Waters? ☐ Yes ☒ No
 - a. If yes for (1), is there an unimpaired WQMS between your site and the impaired WQMS? ☐ Yes ☒ No
 - b. If no for (a), list the waterbody. _____ List the impairment(s). _____
 - c. Will construction SW discharges from your site contain the pollutant(s) of impairment? ☐ Yes ☒ No
 - d. If yes for (c), will use of the selected BMPs ensure that the site's discharges will not contribute to or cause further water quality standard violations? ☐ Yes ☒ No
2. For which a TMDL(s) has been developed? ☐ Yes ☒ No
 - a. If yes for (2), list the waterbody. _____ List the impairment(s). _____
 - b. Has the standard been attained for the impairment(s)? ☐ Yes ☒ No
 - c. If no for (b), will construction SW discharges from your site contain the pollutant of impairment?
☐ Yes ☒ No
 - d. If yes for (c), are your discharges consistent with the assumptions and requirements of the TMDL(s)?
☐ Yes ☒ No
 - e. If no for (d), will use of the selected BMPs ensure that the site's discharges will not contribute to or cause further water quality standard violations? ☐ Yes ☒ No

- D. Are S.C. Navigable Waters (SCNW) on the site? ☐ Yes ☒ No If yes, list the SCNW: _____
- Will any construction activities cross over or occur in, under, or through the SCNW? ☐ Yes ☒ No
- If yes, then describe activity (e.g., road crossing, sub aqueous utility line). _____
- Has an SCNW permit been issued for this site? ☐ Yes, for all activities ☐ Yes, for some activities ☒ No
- If yes, list permit number and corresponding activities. _____

V. Operator Information

- A. SWPPP Preparer: Steve Andrews S.C. Registration #: 12860
Company/ Firm: Andrews and Burgess Inc S.C. COA #: C00008
Mailing Address: 40A Shanklin Road City: Beaufort State: SC Zip: 29906
Phone: (Day) 843 - 466 - 0369 (Mobile) _____ (Fax) 843 - 466 - 9766
Email address (optional): _____
- B. Operator of Day-to-Day Site Activities [ODSA] (Company or person): Andrews and Burgess, Inc
Site Contact (if ODSA is company): Ryan Lyle, EIT
Mailing Address: 40-A Shanklin Road City: Beaufort State: SC Zip: 29906
Phone: (Day) 843 - 466 - 0369 (Mobile) _____ (Fax) 843 - 466 - 9766

VI. Signatures and Certifications

- A. One copy of the SWPPP, all specifications and supporting calculations, forms, and reports are herewith submitted and made a part of this application. I have placed my signature and seal on the design documents submitted signifying that I accept responsibility for the design of the system. Further, I certify to the best of my knowledge and belief that the design is consistent with the requirements of Title 48, Chapter 14 of the Code of Laws of SC, 1976 as amended, pursuant to Regulation 72-300 et seq., and in accordance with the terms and conditions of SCR100000. (This should be person identified in Section V.A.)

Please check one. ☒ Engineer ☐ Tier B Land Surveyor ☐ Landscape Architect

Steven W. Andrews, P.E.

Printed name of SWPPP Preparer

Signature of SWPPP Preparer

12860

S.C. Registration #

- B. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I hereby certify that all land-disturbing construction and associated activity pertaining to this site shall be accomplished pursuant to and in keeping with the terms and conditions of the approved plans and SCR100000. I also certify that a responsible person will be assigned to the project for day-to-day control. I hereby grant authorization to the Department of Health and Environmental Control and/or the local implementing agency the right of access to the site at all times for the purpose of on site inspections during the course of construction and to perform maintenance inspections following the completion of the land-disturbing activity. (See Section 122.22 of S.C. Reg. 61-9 for signatory authority information.)

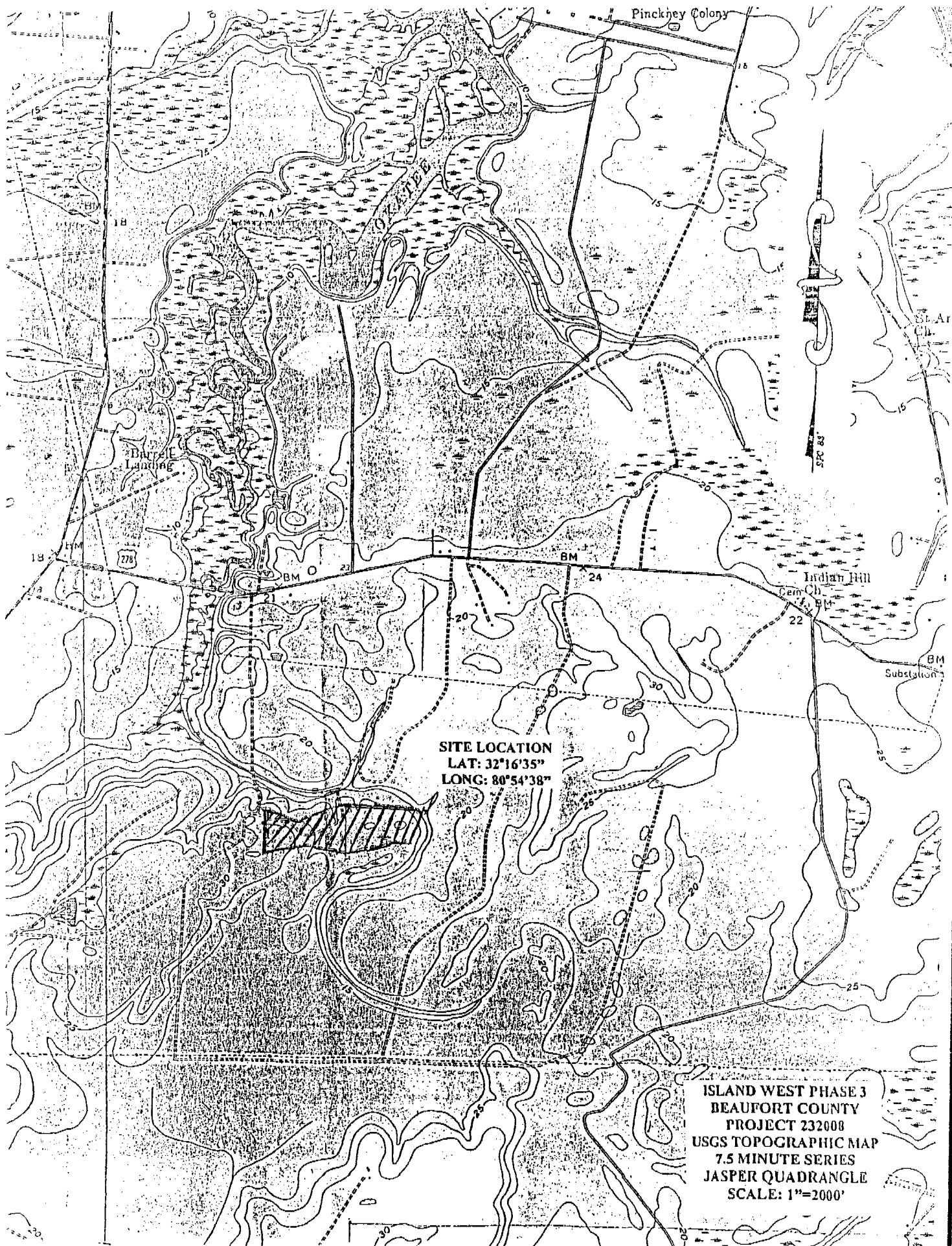
KLAND WEST ASSOCIATES, INC.

Printed name of Project Owner/Operator

Signature of Project Owner/Operator

Vice Pres

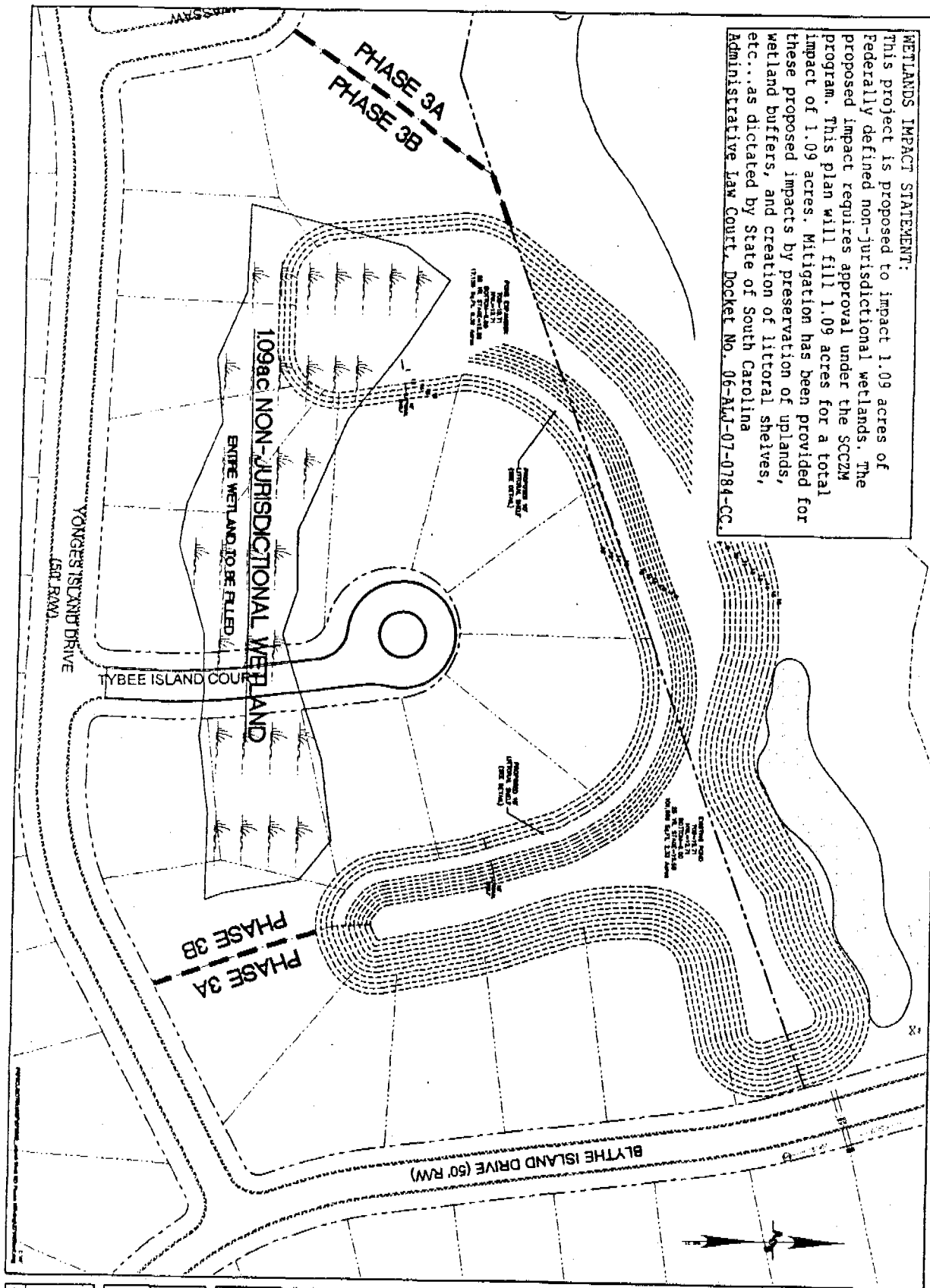
Title/Position



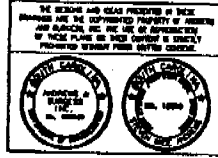
SITE LOCATION
LAT: 32°16'35"
LONG: 80°54'38"

ISLAND WEST PHASE 3
BEAUFORT COUNTY
PROJECT 232008
USGS TOPOGRAPHIC MAP
7.5 MINUTE SERIES
JASPER QUADRANGLE
SCALE: 1"=2000'

WETLANDS IMPACT STATEMENT:
 This project is proposed to impact 1.09 acres of Federally defined non-jurisdictional wetlands. The proposed impact requires approval under the SCCZM program. This plan will fill 1.09 acres for a total impact of 1.09 acres. Mitigation has been provided for these proposed impacts by preservation of uplands, wetland buffers, and creation of littoral shelves, etc...as dictated by State of South Carolina Administrative Law Court, Docket No. 06-ALJ-07-0784-CC.



PLAN REVISIONS			
No.	Description	Date	By
1			
2			
3			
4			
5			
6			
7			



Andrews & Burgess Inc.
 Building & Construction
 12345 Main Street
 Charleston, SC 29401
 Phone: (843) 123-4567
 Fax: (843) 987-6543
 Email: info@ab-inc.com

Site Development Plan
 For
 109ac Non-Jurisdictional Wetland
 U.S. Hwy. 27E
 Bluffton, SC
 Bluffton County

SCCM
 WETLANDS
 IMPACT
 PLAN
 Date Drawn: 08/01/2022
 Last Modified: 08/01/2022
 Drawn By: J. Burgess
 Reviewed By: A. Burgess

SHEET #
1
 of 1
 JOB: 272022